

# PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

10820109

## CLAIMS AS FILED - PART I

FOR	(Column 1)		(Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(b))						\$			
TOTAL CLAIMS (37 CFR 1.16(c))		minus 20 =			X \$			X \$	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		minus 3 =			X \$			X \$	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.103(d))									
TOTAL								TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	12	Minus	20				X \$			X \$	
Independent (37 CFR 1.16(b))	1	Minus	3				X \$			X \$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.103(d))											
TOTAL ADDL FEE										TOTAL ADDL FEE	

  

AMENDMENT B	(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus					X \$			X \$	
Independent (37 CFR 1.16(b))		Minus					X \$			X \$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.103(d))											
TOTAL ADDL FEE										TOTAL ADDL FEE	

  

AMENDMENT C	(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus					X \$			X \$	
Independent (37 CFR 1.16(b))		Minus					X \$			X \$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.103(d))											
TOTAL ADDL FEE										TOTAL ADDL FEE	

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit in the public, which is to be (and is) the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 17 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. These estimates are based on the information provided by the USPTO on the amount of time you require to complete this form and the suggestions for reducing this burden. It should be noted that the USPTO is not responsible for the time and effort required to complete this form. USPTO, Department of Commerce, P.O. Box 1450, Alexandria, VA 22304-1450. For more information, contact the USPTO at 1-800-790-9897.